10100 Horseshoe Bend Rd. Boise, ID 83714

Phone: (208) 780-1340 Fax: (208) 780-1341 Email: BoiseCemetery@veterans.idaho.gov

This form must be submitted to the cemetery office on the day of interment.

FY 2023

See Instructions On Next Page

11 2025		See mstruct	tions on Next Page												
REQUIRED IN	FORMA	FION: Autom	natically formatted accor	ding to regulations & space available.											
NAME OF DECEASED:			1	SMITH											
MARY	FIRST NAME (or Initial) MIDDLE NAME (or Initial)														
	nate of Pate of Embler														
Birth:05/15/19	Emblem #: (Optional; See next page) 69 or None														
If Deceased was the Vete Veteran's Rank:			Veteran's Service R	ranch:											
War Service: (Optional)				ional & Proof Required)											
☐ World War II ☐ Korea ☐ Vietnam ☐ Persian Gulf ☐ Legion of Merit ☐ Purple Heart ☐ Air Medal															
□ Other: □ None □ Other: □ None															
ADDITIONAL INSCRIPTION:															
Punctuation is limited to															
CASKET BURIAL HEADST	SKET BURIAL HEADSTONE: (LIMIT: 15 SPACES PER LINE)														
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				No Commas,											
GRANDMA	FRI	E N D		Quotation Marks, etc.											
U N T I L W	E ME	E T													
A G A I N				Niche Cover: Two emblems can be inscribed at top when											
COLUMBARIUM NICHE COVER: (LIMIT: 13 SPACES PER LINE) second person added. HTT Flot Morbor															
	Urn Flat Marker: One line of inscription is generally available when second person's name & dates are added.														
				Scatter Garden/ Memorial:											
				"In Memory Of" included. When second person's name & dates are added, no additional space for inscription is common.											
URN FLAT MARKER: (LIM		PER LINE)		Spouse Only Markers Include:											
	THE PRINCES			"Wife Of / Husband Of" Veteran's Name, Rank & Branch											
SCATTER GARDEN/ MEM	ORIAL MARK	KER: (LIMIT: 22 SI	PACES PER LINE)												
	I understand that the information above will be automatically formatted according to regulations & space available. Once submitted, the cemetery will only accept changes if a factual error has occurred. The marker is delivered approximately 6-12 weeks after														
ordered; placement times then			I sur the metric is well to	and a second a secon											
Signature of Next of Kin or A	uthorized Repr	esentative:	Relationship:	Date:											

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03/05/2023

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FY 2	2 02.	3										Se	e Ir	isti	ruc	tior	is C)n N	lex	t Pa	ıge							
	REQUIRED INFORMATION: Automatically formatted according to regulations & space available. NAME OF DECEASED:																											
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,		FIF	RST	NAM	1E (or In	itia	1)		_)—	M	IDL	DLE NAME (or Initial)										LAST NAME			
Da Bir	_ I												em #: (Optional; See next page) or ■ None															
		ease																										
		an's																										
	War Service: (Optional) Valor Medals: (Optional & Proposition of Marit - Drumple H																											
85 - 39	☐ World War II ☐ Korea ☐ Vietnam ☐ Persian Gulf ☐ Legion of Merit ☐ Purple He															19 1												
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L	U	K	Е	_	1	:	4	5				_					-									"In Memory Of" included. When second person's name & dates are added, no		
																					200					additional space for inscription is common.		
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ordered; placement times then vary.

Signature of Next of Kin or Authorized Representative:	Relationship: SPOUSE	Date: 02/15/2023

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Vete	ran'	s R	anl	K: _												-8	Ve	tera	an's	Se	rvic	ce E	3ra	nch	<u>:</u>		
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	□ World War II □ Korea □ Vietnam □ Persian Gulf □ Legion of Merit □ Purple Hea □ Other: □ Other:															eart 🔲 Air Medal											
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	ADDITIONAL INSCRIPTION: CASKET BURIAL HEADSTONE: (LIMIT: 15 SPACES PER LINE) E É É ÃÃ Ā Ë No Communication is limited to: & () - : / ' II È É É ÃÃ Ā Ë															<i>limited to:</i> & () - : / ' II											
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Two emblems of second person															Niche Cover: Two emblems can be inscribed at top when second person added.												
COLUMBARIUM NICHE COVER: (LIMIT: 13 SPACES PER LINE) Urn Flat Marker: One line of inscription is generally available.															One line of inscription is generally available when second person's name & dates are												
	Scatter Garden/ Memorial: "In Memory Of" included. When second person's name & dates are added, no															"In Memory Of" included. When second											
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ordered; placement times then vary.

Signature of Next of Kin or Authorized Representative:	Relationship: SPOUSE	Date: 01/15/2023

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	REQUIRED INFORMATION: Automatically formatted according to regulations & space available.																										
NAN	NAME OF DECEASED: MARY J SMITH															OMITI											
MARY MARY																		J					-6				SMITH
		FI	RST	' NA	ME	(01	r Ini	itial	1)					M	IDL)LE	NA	ME	(or	Ini	nitial)						LAST NAME
Date of Birth: 01/20/1960 If Deceased was the Veteran:														e of th:	a		0	2/0	1/2	02	3				En	ıble	em #: (Optional; See next page) 49
If D	ec	eas	ed	wa	s th	ie V	/ete	era	n:																		
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ADDITIONAL INSCRIPTION: CASKET BURIAL HEADSTONE: (LIMIT: 15 SPACES PER LINE)															Punctuation is limited to:												
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Relationship:

DAUGHTER

Date:

02/15/2023

Signature of Next of Kin or Authorized Representative: